DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS AA (AMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: WINGS (310194)

Address: 2303 W GALENA ST, MILWAUKEE, WI 53205

License Status: REGULAR

Licensed/Certified/Registered 06/28/1995

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0095858 End Date: 10/18/2005 Type: ABBREVIATED Purpose: SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10007211 Served 11/10/2005

		Compliance	
Deficiencies Cited	Subject Area	Verified	Corrected
50.065(6)(am)	FOUR YEAR CAREGIVER BACKGROUND		
	REQUIREMENT		
83.14(1)(a)	CLIENT RELATED TRAINING		
83.14(2)	TRAINING DIETARY NEEDS & MENU PLANNING		
83.14(7)(b)	CONTINUING EDUCATION		
83.33(4)(e)	ASSISTANCE WITH SELF-DIRECTION		
83.41(10)(a)	BUILDING MAINTENANCE		
83.52(2)(d)	THIRD FLOOR RESTRICTIONS		

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS AA (AMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Enforcement History

Date: 11/09/2005 SOD #10007211 Appealed: Yes Decision: STIPULATION

Sanctions

FORFEITURE---83.14(1)(a) FORFEITURE---83.14(2) FORFEITURE---83.14(7)(b)